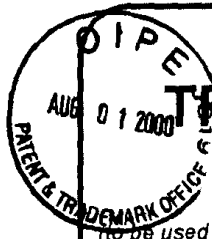


Please type a plus sign (+) inside this box → ☐

(Modified) PTO/SB/21 (6-98)  
Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/494,282
Filing Date	January 18, 2000
First Named Inventor	Sergey A. Selifonov
Group Art Unit	Unassigned
Examiner Name	Unassigned
Total Number of Pages in This Submission	5
Attorney Docket Number	02-028930US

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Receipt acknowledgment postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<b>Authorization to Charge Deposit Account</b> Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	The Law Offices of Jonathan Alan Quine
Signature	<i>Jonathan Alan Quine</i>
Date	July 26, 2000

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: July 26, 2000

Typed or printed name	Alexandra Allison		
Signature	<i>Alexandra Allison</i>	Date	July 26, 2000



I hereby certify that this correspondence is  
being deposited with the United States  
Postal Service as first class mail in an envelope addressed to:

Assistant Commissioner for Patents,  
Washington, D.C. 20231,  
On July 26, 2000

The Law Offices of Jonathan Alan Quine

By Alexandra Allison  
Alexandra Allison

Attorney Docket No. 02-028930US  
Client Ref. No. 0124.004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Sergey A. Selifonov, *et al.*

Application No.: 09/494,282

Filed: January 18, 2000

For: Methods for Making Character  
Strings, Polynucleotides and Polypeptides  
Having Desired Characteristics

Examiner: Unassigned

Art Unit: 1635

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER 37  
CFR § 1.97 and § 1.98

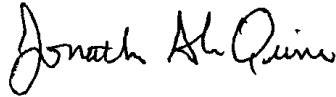
Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

The references cited on attached form PTO-1449 are being called to the  
attention of the Examiner. Copies of the references are enclosed. It is respectfully requested  
that the cited information be expressly considered during the prosecution of this application,  
and the references be made of record therein and appear among the "references cited" on any  
patent to issue therefrom.

Applicant believes that no fee is required for submission of this statement, since it is being submitted prior to the first Office Action. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 50-0893. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Jonathan Alan Quine  
Reg. No. 41,261

**RECEIVED**  
AUG 13 2000  
TECH CENTER 1600/2900

THE LAW OFFICES OF JONATHAN ALAN QUINE  
P.O. Box 458  
Alameda, CA 94501  
Tel: (510) 337-7871  
Fax: (510) 337-7877

JAQ:afa